

## CITY OF ROCHESTER RENEWAL BUSINESS PERMIT APPLICATION

NET - Records Management 30 Church Street - 007A Rochester, New York 14614

To be complete	d by Busines	ss Owne	r and/or Ope	erator:	428-6520	
Business Name:			Busine	ss Phone:		
Business Operator: Business Address:						
Business Address: _			ZIP:		_	
Business Type:		oa Store	R/S= Retail S	tore	S= Barber Shop/Salon	
					B/R= Bar/Restaurant	- Facility
Other Related Licens		undromat	D= Drug Stor	е	A= Automobile Service	e racility
(i.e. Liquor, Entertai Amusement Center	nment, r, Pawn Broker,					er:
Second Hand Dea						
(If license is pending	g, state so)					
Date of Birth:/	/			Hours	of Operation: from:	to:
Business Owner and Owner/Operator:						
Home Address:				Home	Phone:	
				Zip:		
Partners:						
I understand that f	alse statement	s made oi	n this applicati	on may re	sult in the denial or re	evocation of the Business
Permit.						
	perator Signat	ure:			Date	<b>:</b>
ALL PERMITS WIL	L BE MAILED 1	O THE BU	JSINESS ADDI	RESS		
To Be Completed b						
FEE: N/C: Nev	v:\$25.00 C	onditiona	I:\$300			
NET ADMINISTRAT	OR & NET LIE	UTENANT	(ATTACH PER	RMIT APP	ROVAL FORM)	_
DATE OF NET INSF	PECTION (If Ned	cessary): _		TIME:	VIOL	ATIONS:
NET INSPECTOR:			Date:		YES	NO
	DE ENFORCEM					
Current C/O	Yes	No I	Date			
Open cases	Yes	No				
Nuisance Points	Yes	No	# Points			
Active Permits	Yes	No		The re	quired approvals mus	st be signed and dated by
MCVB Judgements	Yes	No		the ap	ppropriate staff before	e a Permit will be issued.
			Dat	e of Appro	val:	Permit #: